

Behavioral and Social Sciences Research Coordinating Committee

Minutes of February 9, 2001 Meeting

Attendance

The NIH Behavioral and Social Sciences Research Coordinating Committee met on February 9, 2001 from 9:00 to 11:00 a.m. in the Gateway Building, Room 533. Ronald Abeles (OD/OBSSR), Chairperson, presided. Members and alternate members in attendance were: Fred Altman (NIMH), Judy Auerbach (OD/OAR), Chris Bachrach (NICHD), Joy Boyer (NHGRI), Pat Bryant (NIDCR), Jacqueline Crawley (NIMH), Bob Croyle (NCI), Emmeline Edwards (NINDS), Sanford Garfield (NIDDK), Lynne Haverkos (NICHD), Suzanne Heurtin-Roberts (NCI), Gertrude McFarland (CSR), Helen Meissner (NCI), Georgeanne Patmios (OD/OBSSR), Lana Shekim (NIDCD), Anita Sostek (CSR), Susan Stark (NIAMS), Mike Stefanek (NCI), Marina Volkov (NIDA), Martina Vogel-Taylor (OD/ODP), Merry Ward (NIA), and Sabra Woolley (NCI).

Guests attending were: Danielle Berry (PAA), Sarah Brookhart (APS), Sue Davis (APSA), Lauren Fasig (SRCD), Chris Hartel (NRC), David Johnson (FBPCS), Pat Kobor (APA), Stacy Lathrop (AAA), Bruce McEwen (Rockefeller University and NRC), Barbara Torrey (NRC), and John Wertman (COSSA).

Presentation by NAS Staff of the NRC Report *New Horizons in Health: An Integrative Approach* (report is available at <http://www.nap.edu/catalog/10002.html>)

BSSR CC members welcomed Barbara Torrey, Executive Director of the Division of Behavioral and Social Sciences and Education (DBSSE) at the National Research Council (NRC)/National Academy of Sciences (NAS); Christine Hartel, Director of the Board on Behavioral, Cognitive, and Sensory Sciences and Education, DBSSE; and Bruce McEwen a member of the report's committee.

Background. In 1999, then Director of OBSSR, Dr. Norman Anderson, asked the National Research Council, National Academy of Sciences, to develop a research plan to guide NIH in supporting areas of high priority in the behavioral and social sciences. The resulting committee met four times between May 1999 and February 2000 and issued its report in January 2001 (Burton H. Singer and Carol D. Ryff (eds.), *New Horizons in Health: An Integrative Approach. Committee on Future Directions for Behavioral and Social Sciences Research at the National Institutes of Health*. Washington, DC: National Academy Press, 2001).

Presentation. Dr. Hartel briefly described the report, which identifies a broad domain of questions at the interface of social, behavioral, and biomedical sciences whose resolution could lead to major improvements in the health of the US population. The report also emphasizes research priorities that cut across Institute boundaries at NIH, thereby underscoring the broad significance of behavioral and social science research for multiple disease outcomes as well as health promotion. Dr. Bruce McEwen also presented background on the report, from his perspective as a committee member.

The 10 priority areas for research investment to integrate the behavioral, social and biomedical sciences at NIH recommended in the report are:

1. Predisease Pathways: identify early and long-term biological, behavioral, psychological, and social precursors to disease;
2. Positive Health: identify biological, behavioral, and psychosocial factors that contribute to resilience, disease resistance, and wellness;
3. Gene Expression: understand environmentally induced gene expression and its connection to positive and negative health outcomes;

4. Personal Ties: explicate the mechanisms by which proximal social interactions influence health and disease outcomes;
5. Healthy Communities: identify the collective properties of social and physical environments that influence health and disease outcomes;
6. Inequality: clarify the mechanisms through which socioeconomic hierarchies, racism, discrimination, and stigmatization influence health and disease outcomes;
7. Population Health: understand macro-level trends in health status and evaluate the performance of the health care system;
8. Interventions: expand the scope and effectiveness of strategies for social and behavioral interventions to improve health;
9. Methodology: develop new measurement techniques and study designs to link information across levels of analysis (molecular, cellular, behavioral, psychosocial, community) and across time; and
10. Infrastructure: establish ways to maintain long-term study populations and to train scientists to integrate health-related knowledge across multiple disciplines.

Discussion. Discussion points included: implications of the report for how we think about secondary prevention; the advantages and disadvantages of the current NIH structure in implementing the report's recommendations; the need to create a mechanism at NIH for developing consensus; and the hope that this report will help staff get the message out that a focus on behavioral and social sciences is integral to the mission of all ICs.

Much of the group discussion focused on NIH review issues. Dr. McEwen expressed his opinion that although there are many interdisciplinary applications to NIH, most fall through the cracks of the review system, and that this is a major problem in implementing the report's recommendations. This led to a discussion of where basic behavioral and social sciences applications go that aren't specific to one IC and the urgent need to encourage the review process to better handle interdisciplinary applications. Some noted however that the problem may not be with the CSR structure, but rather reflects the scientific community that has a strong tendency, when reviewing an interdisciplinary application, to concentrate on what's wrong in one's own disciplinary area. This led to a discussion of the structure of science education, and the need to better train interdisciplinary scientists (e.g., mid-career training, summer institutes sponsored by professional societies, and incentives offered to academic institutions) since this would eventually help strengthen the NIH review process. The group noted the successful NAS model of defining an interesting problem and getting a group made up of many different disciplines to collaborate to solve it. It was suggested that the executive summary of the report could be used to educate review committees that handle interdisciplinary applications. Anita Sostek, CSR, noted that a committee will soon be evaluating the reorganized behavioral and social sciences, epidemiology, nursing and methods Study Sections that went into effect with the June 1999 review of applications. If staff have recommendations for committee members, please call her at 301-435-1260.

The group noted that the report's committee members are really unrepresentative of the larger academic community since they are among the few who have succeeded in doing interdisciplinary research. Since young researchers lack mentors in this area, perhaps publishing personal case studies of successful interdisciplinary relationships would be valuable. Barbara Torrey, NRC/NAS, suggested that NIH think about copying the principle of the MacArthur Network internally at NIH, since these generally succeed in creating a culture of people who are able to tackle interdisciplinary questions. Ms. Torrey noted that in her experience at the Academy, the hardest thing academic researchers must do is to respect the "rules of evidence" of other disciplines. The group noted that this is true within ICs also.

Dissemination Efforts. OBSSR has already arranged for a briefing to Dr. Kirschstein, and Dr. Kington will be presenting the report at IC Councils over the next few rounds. The group recommended that before Dr. Kington present to IC Councils, that he brief IC Directors first. The group also asked that OBSSR make our slide presentations available to the BSSR CC and that OBSSR present also to universities. Also, copies of the report will be distributed to all members of the BSSR CC. The COSSA representative recommended that the report be distributed to DHHS Secretary Thompson's appointees. The NRC is planning to brief the Congressional Health and Behavior Caucus. The NRC has already briefed the NSF. The NRC and OBSSR will collaborate on developing some visual aids that will be distributed to the group.

Announcements

There is concern that the new MacArthur Foundation president may change direction toward funding more applied research, which may negatively impact health programs. The group was encouraged to write to the new president.

Next BSSR CC meeting

March 9, 2001
9:00 - 11:00 A.M.
Gateway Building, Room 525
7201 Wisconsin Avenue, Bethesda, MD